

111TH CONGRESS  
1ST SESSION

# H. R. 3475

To amend the Public Health Service Act to double the amount of funds authorized to be appropriated to the National Institutes of Health for medical research with the greatest potential for near-term clinical benefit.

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## IN THE HOUSE OF REPRESENTATIVES

JULY 31, 2009

Mr. FORBES introduced the following bill; which was referred to the  
Committee on Energy and Commerce

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## A BILL

To amend the Public Health Service Act to double the amount of funds authorized to be appropriated to the National Institutes of Health for medical research with the greatest potential for near-term clinical benefit.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Accelerate Cures for  
5       Patients Act of 2009”.

1 **SEC. 2. ADDITIONAL NIH FUNDING FOR RESEARCH WITH**  
2 **GREATEST POTENTIAL FOR NEAR-TERM**  
3 **CLINICAL BENEFIT.**

4 Title IV of the Public Health Service Act (42 U.S.C.  
5 281 et seq.) is amended by inserting after section 402A  
6 the following:

7 **“SEC. 402A-1. ADDITIONAL FUNDING FOR RESEARCH WITH**  
8 **GREATEST POTENTIAL FOR NEAR-TERM**  
9 **CLINICAL BENEFIT.**

10 “In addition to the amount authorized to be appro-  
11 priated each fiscal year pursuant to section 402A to con-  
12 duct or support medical research under this title, there  
13 is authorized to be appropriated an equal amount for med-  
14 ical research (relating to cancer, cardiovascular disease,  
15 diabetes, Alzheimer’s disease, Parkinson’s disease, or  
16 other diseases or conditions) that (as determined by the  
17 Secretary) has the greatest potential for near-term clinical  
18 benefit in human patients, as indicated by substantial evi-  
19 dence from basic research or by substantial clinical evi-  
20 dence. Such evidence may include but is not limited to—

21 “(1) evidence of improvement in one or more  
22 human patients suffering from illness or injury, as  
23 documented in reports by professional medical or  
24 scientific associations or in peer-reviewed medical or  
25 scientific literature; or

- 1 “(2) approval for use in human trials by the
- 2 Food and Drug Administration.”.

